



## SINGLE FORM FOR HUMANITARIAN AID OPERATIONS

### 1. GENERAL INFORMATION

#### 1.1. Name of humanitarian organisation

HOx (Humanitarian Organisation x)

#### 1.2. FPA number (if applicable)

[...]

**Note**

Include, if applicable, the FPA number

#### 1.3. Purpose of the submission

##### 1.3.1. Proposal

**[NOT APPLICABLE]**

New proposal

Revised proposal

ECHO reference A/

##### 1.3.2. Interim narrative report date: dd-mm-yy

1.3.3. Preliminary final report

**[NOT APPLICABLE]**

1.3.4. Final report

**[NOT APPLICABLE]**

#### 1.4. Grant agreement number ECHO/[...]

#### 1.5. Implementing rules applicable to this agreement

**[NOT APPLICABLE]**

Grant, 100% financing

Grant, co-financing

#### 1.6. Framework of this submission

**[NOT APPLICABLE]**

Primary emergency decision

Emergency decision

Ad hoc decision

Global plan decision

DIPECHO

Other, please specify

#### 1.7. Executive summary of operation

**[NOT APPLICABLE]**

(4.1.) Title of the operation

(4.2.) Country(ies) and location(s) of implementation

(4.3.) Start date of the operation

(4.4.) Duration in months

(4.5.1.) Total number of direct beneficiaries

(4.5.2.) Identify the status and give details of the beneficiaries

- (4.7.1.) Operation specific objective
- (4.7.2.) Indicators and sources of verification
- (4.8.1.) Expected result 1
- (4.8.n.) Expected result n
- (11.1.) Total budget of the operation: EUR
- (11.2.) Contribution requested from EC: EUR
- (11.5) Eligibility date of expenditure

**Note:** If additional studies have been carried out, this chapter is intended to illustrate the results of such studies. This is fundamental in the event of significant readjustments of the operation

## **2. NEEDS ASSESSMENT [NOT APPLICABLE]**

- 2.1. Date(s) of assessment
- 2.2. Methodology and sources of information used
- 2.3. Organisation/person(s) responsible for the assessment
- 2.4. Problem statement and stakeholder analysis
- 2.5. Findings of the assessment

**Note:**  
See previous callout

## **3. HUMANITARIAN ORGANISATION'S STRATEGY [NOT APPLICABLE]**

- 3.1. Partner's strategy in country and/or region(s) of operation
- 3.2. Link between operation, the findings of the assessment and the problem statement
- 3.3. Is/are there similar operation(s) in the country/region?  
If yes, explain the measures foreseen to avoid overlap/duplication
- 3.3. Previous humanitarian operations with EC grants in the country/ region
- 3.5. Have you discussed this proposal with ECHO's technical assistance office in the country/region of operation?

**Note:** Data must be updated in relation with the advancement of work, especially as regards the beneficiaries.  
**Note:** The framework of objectives may not be modified.

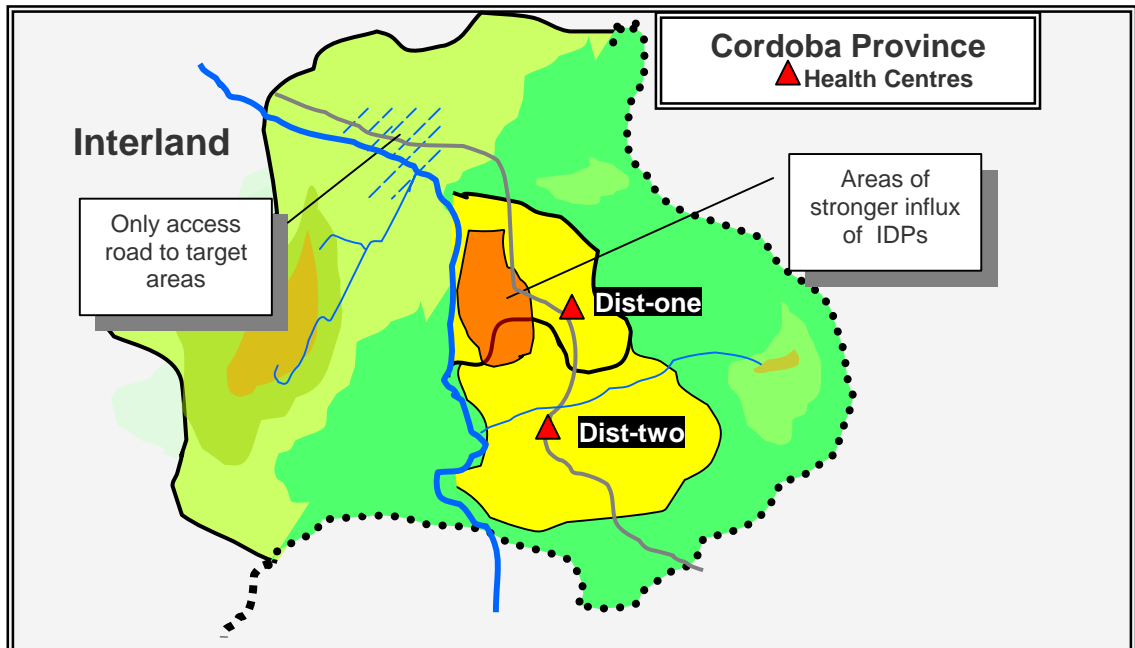
## **4. OPERATIONAL FRAMEWORK**

### **4.1. Title of operation**

⇒ Restoring of minimal health conditions for the populations affected by the disaster and support of sanitary zones in the Dist-one and Dist-two Districts (Cordoba Region) – Interland”.

#### 4.2. Exact location of the operation

The operation is taking place according to the initial proposal as evidenced in the following map:



**Note:** Insert starting date of operation. In case this date does not correspond with the date in art. 2.2. of the GA, reasons must be explained in detail (an amendment may be needed).

#### 4.3. Start date of the activities in the field, (start date of the operation) dd-mm-yy as per art. 2.2. of the Grant Agreement.

**Note:** Each request of extension of the implementation period **MUST** be included and motivated in this section, in order to obtain approval/refusal from ECHO

#### 4.4. Duration in months 8 months, as per art. 2.2. of the Grant Agreement

**Note:** Throughout this section, confirm, update and if possible detail more accurately the data contained in the proposal

#### 4.5. Beneficiaries

##### 4.5.1. Total number of direct beneficiaries

In the course of the operation, the number of beneficiaries has risen compared to the estimate contained in the proposal because of the arrival of newly displaced persons.

The total number of beneficiaries at this point can be estimated to be 17.500 (users of health centres and beneficiaries of other services provided by the operation).

#### 4.5.2. Identify the status and give details of the beneficiaries:

Data gathered during the implementation phase allow to update the description of beneficiaries, as indicated in the following table:

**Note:** Update the numbers and data on beneficiaries providing more detail than in the operation proposal.

Type	Status	Number
<b>Displaced Persons</b>	IDPs, some of which just recently arrived from nearby districts, mainly families of farmers raising small animals. In most cases families were able to carry their belongings with them.	7.500
<b>Displaced women in target districts</b>	IDPs.	2.800
<b>Displaced children</b>	IDPs; some cases of scabies have occurred [...].	2.650
<b>Users of health centres in the two districts</b>	Local population. Estimate was correct for both centres.	10.000
<b>Children &lt; 5</b>	Mixed.	9.200
<b>Women classified as “most vulnerable”</b>	Local population. Their number grew after a census and arrival of newly displaced persons.	3.600
<b>Medical and paramedical personnel in the two districts</b>	Local population. The number was updated following minor changes in the health centres' staffing.	123

#### 4.5.3. “Catchment” population

The number of indirect beneficiaries is confirmed to be 25.000 people in both districts.

#### 4.5.4. What are the identification mechanisms and criteria?

Beneficiaries have been identified according to the criteria in the proposal:

Type	Method of selection
<b>Displaced Persons</b>	Census by local authorities conducted during 2nd and 3rd moth of the operation.
<b>Displaced women in target districts</b>	Census by local authorities conducted during 2nd and 3rd moth of the operation.
<b>Displaced children</b>	Census by local authorities conducted during 2nd and 3rd moth of the operation.
<b>Users of health centres in the two districts</b>	Estimate confirmed by data gathered for first campaign of vaccination conducted in the target areas.
<b>Children &lt; 5</b>	Estimate confirmed by data gathered for first campaign of vaccination conducted in the target areas.

<b>Women classified as “most vulnerable”</b>	Identified according to a points system (accommodation, age, number of children, presence/absence of husband, economic activity, extended family, presence of elderly people in family)
<b>Medical and paramedical personnel in the two districts</b>	Personnel employed by health centres.

#### 4.5.5. To what extent and how were the beneficiaries involved in the design of the operation?

During the early period of implementation (first and second month) several meetings have been held with community representatives and groups of women to decide the location of water outlets and the first batch of latrines [...].

For the vaccination campaigns, the [...] mobilised [...]

#### 4.5.6. Sectors of activity

The sectors of activity did not differ from those identified in the operation proposal:

- Sector 1: Water & Sanitation:
  - ⇒ *Rural water sources*: Drilling of 2 wells;
  - ⇒ *Waste disposal and latrines*: Building of 100 gender-separated latrines
- Sector 2: Health
  - ⇒ *Primary health care*: Light rehabilitation and relaunch of activities in the two health centres; relaunch of vaccination activities (in coordination with AWD);
  - ⇒ *Rehabilitation of medical facilities*: Light rehabilitation in the two health centres.
- Sector 3: Non-food Items:
  - ⇒ *Domestic items*: distribution of kitchen kits and blankets to the more vulnerable family groups.

#### 4.5.7. Give the following information for each sector

- Total number of direct beneficiaries

Sector	Total number of direct beneficiaries
<b>Water &amp; Sanitation</b>	17.500 + 123
<b>Health</b>	17.500 +123
<b>Non-food Items</b>	6.400

- Types of beneficiaries and number of beneficiaries per type

Sector	Category of beneficiaries	N° of beneficiaries per category
<b>Water &amp; Sanitation</b>	Displaced persons	7.500
	Displaced women in target districts	2.800
	Displaced children	2.650
	Estimated users of health centres in the two districts	10.000
	Children < 5	9.200
<b>Health</b>	Displaced persons	7.500
	Displaced women in target districts	2.800
	Displaced children	2.650
	Estimated users of health centres in the two districts	10.000
	Children < 5	9.200
	Medical and paramedical personnel in the two districts	123
<b>Non-food Items</b>	Women classified as "most vulnerable"	3.600
	Displaced women in target districts	2.800

- Location

Sector	Location
<b>Water &amp; Sanitation</b>	Dist-two and Dist-one
<b>Health</b>	Dist-two and Dist-one
<b>Non-food Items</b>	Dist-one (for the most part, also considering newly displaced persons) and Dist-two

#### 4.6. Principal objective

The general objective of the operation is confirmed, in accordance with the objective of the Decision adopted by ECHO for the funding of the Ad Hoc Decision, as:

- ⇒ Contributing to the recreation of the basic conditions for public services in the disaster-affected areas of the Cordoba province.

#### 4.7. Operation-specific objective

##### 4.7.1. Specific objective

The objective of the operation, with the number of beneficiaries updated to reflect the arrival of new IDPs, is confirmed:

⇒ Living conditions brought back to the level preceding the disaster according to health and hygiene standards identified for the 7.500 displaced persons and the 10.000 vulnerable residents in the Dist-one and Dist-two health zones (users of health centres and disadvantaged women.)

At the time of the report the operation is aiming to provide the following benefits:

**Note: Actualise the tables**

	Type of beneficiaries (see 4.5.2.)	Foreseen benefits
I	<b>Displaced persons</b>	<ul style="list-style-type: none"> <li>⇒ Access to safe toilet facilities for the first 3.000 beneficiaries of the newly built latrines;</li> <li>⇒ Better environmental conditions for the first 3.000 beneficiaries of the newly built latrines;</li> <li>⇒ Guaranteed minimum medical care for all 7.500 displaced persons</li> </ul>
II	<b>Displaced women in target districts</b>	<ul style="list-style-type: none"> <li>⇒ Supply of minimum required elements for safe preparation and storage of food and water for 2.000 women.</li> </ul>
III	<b>Displaced children</b>	<ul style="list-style-type: none"> <li>⇒ See "I";</li> <li>⇒ Assured vaccine coverage for the first group (50%) of identified displaced children</li> </ul>
IV	<b>Users of health centres in the two districts</b>	<ul style="list-style-type: none"> <li>⇒ Less incidency of gastro-intestinal diseases: -20% and -45% recorded in the Dist-one and Dist-two areas;</li> <li>⇒ Relaunch of health care services begun especially for emergency room and reproductive health,</li> </ul>
V	<b>Children &lt; 5</b>	<ul style="list-style-type: none"> <li>⇒ Assured vaccine coverage for 50% of children;</li> <li>⇒ Reduction of incidency of gastro-intestinal diseases by 35% and 60% in Dist-one and Dist-two areas respectively</li> </ul>
VI	<b>Women classified as "most vulnerable"</b>	<ul style="list-style-type: none"> <li>⇒ Supply of minimum required elements for safe preparation and storage of food and water for 2.500 women..</li> </ul>
VII	<b>Medical and paramedical personnel in the two districts</b>	<ul style="list-style-type: none"> <li>⇒ Relaunch of general activities and of the implementation of health guidelines, completion of infrastructure work for Dist-one centre (construction of a water outlet), beginning of rehabilitation work for the Dist-two health centre and choosing of location for water outlet, strenghtening of structures</li> <li>⇒ Overseeing of expert personnel in progress, and identification of critical points to address during second part of operation.</li> </ul>

#### 4.7.2 Indicator(s) and source(s) of verification

**Note:** Actualise the data.

Indicators for specific objective			
N.	Indicator	Actualised	Source of verification
Ind. N°1	Level of water-related pathologies brought back to levels preceding disaster in the Dist-one and Dist-two districts (10.000 + 5.000 beneficiaries)	Levels nearly reached (-10% Dist-one, -5% Dist-two) in relation to resident population. Average levels for displaced population in relation to resident population (-45% Dist-one, -20% Dist-two)	Health Centre Reports
Ind. N°2	Vaccine coverage brought back to levels preceding disaster	50% of children received vaccine	Rapporti AWD Health Centre Reports
Ind. N°3	Health and hygiene conditions in the dwellings of displaced persons brought to standards in use in affected zones (5.000 beneficiaries)	40 latrines built and currently maintained according to standards defined by committees	Monthly Reports
Ind. N°4	Coverage of essential health services assured according to parameters preceding disaster (10.000 + 5.000 beneficiaries)	Coverage assured for Copertura garantita for emergency room and reproductive health services, partial coverage for [...]	Health Centre Reports
Ind. N°5	Conditions brought back to normal for all those who have suffered severe loss in the disaster (lack of basic elements necessary for daily life) (5.000 persons)	2.000 families have received a kitchen kit and blankets	Monthly Reports
Ind. N°6	Reference and surveillance system restored and operational at the end of operation	Relaunch of protocols [...]	Monthly Reports
Ind. N°7	After 4 months, self-sufficient latrine committees (10 committees) in areas hosting displaced persons (ability to call autonomously 1 meeting per month per committee)	2 of the 4 latrine committees formed have already called meetings to define maintenance and use of latrines	Monthly Reports
Ind. N°8	[...]	[...]	[...]



**Note:** Actualise the data.

#### 4.8. Results and indicators

##### 4.8.1. Result 1, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 1	A.1. The two health centres (Dist-one and Dist-two) have access to enough water for their needs		
N.	Indicator	Actualised	Source of verification
Ind. N°1	40 litres/day per patient admitted to hospital	50 litres per day guaranteed for the Dist-one centre 20 litres guaranteed for the Dist-two centre (well not active yet)	Monthly health centre reports
Ind. N°2	5 litres/day for visiting (non-admitted) patients	5 litres guaranteed	Monthly health centre reports
Ind. N°3	1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	1.000 litres guaranteed for Dist-one center, 200 for Dist-two	Monthly health centre reports
Ind. N°4	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Water outlet for Dist-one center is maintained adequately	Monthly health centre reports
Ind. N°5	Water points are fully sustained at the end of intervention	Not applicable	Final Evaluation Report
Ind. N°6	[...]		

##### 4.8.2. Result 2, relevant indicator(s) and source(s) of verification

Sector	A. Water and sanitation		
Result 2	A.2. 2.000 inhabitants have access to adequate and safe toilet services in the areas where the displaced population has settled.		
N.	Indicator	Actualised	Source of verification
Ind. N°1	100 latrines built and used appropriately	40 latrines built; All latrines are used appropriately	Final technical report
Ind. N°2	Women can safely use toilet facilities	Safety problems for women have not been encountered	Bi-monthly leader report
Ind. N°3	Latrines are at a minimum distance of 50m from dwellings	All latrines are up to standard	Final technical report
Ind. N°4	[...]	[...]	[...]

#### 4.8.3. Result 3, relevant indicator(s) and source(s) of verification

Sector	B. Health		
Result 3	B.1. Strengthening of the organisation of services (Dist-one and Dist-two – 15.000 users/year) (vaccination, primary health care, reproductive health, mother and child care, epidemiological reference and surveillance system)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]
Ind. N°5	[...]	[...]	[...]
Ind. N°6	[...]	[...]	[...]
Ind. N°7	[...]	[...]	[...]

#### 4.8.4. Result 4, relevant indicator(s) and source(s) of verification

Sector	Health		
Result 4	B.2. Two health centres (Dist-one and Dist-two – 15.000 users/year) supplied with medical materials to ensure their services can be provided (program in cooperation with AWD.)		
N.	Indicator	Actualised	Source of verification
Ind n. 1	[...]	[...]	[...]
Ind n. 2	[...]	[...]	[...]
Ind n. 3	[...]	[...]	[...]

#### 4.8.5. Result 5, relevant indicator(s) and source(s) of verification

Sector	C. Non-food items		
Result 5	C.1. 5.000 family groups classified as “vulnerable” provided with minimum household items (kitchen kits and blankets.)		
N.	Indicator	Actualised	Source of verification
Ind. N°1	[...]	[...]	[...]
Ind. N°2	[...]	[...]	[...]
Ind. N°3	[...]	[...]	[...]
Ind. N°4	[...]	[...]	[...]

- ⇒ **Note:** Actualise activities already completed or being executed and describe results obtained;
- ⇒ **Note:** Give reason for, and explain, in this section any adaptations or changes to work plan, provided they contribute to reaching the specific objective and expected results.

#### 4.9. Activities

At the time of the present report (3 months 15 days into operation) the following activities have been implemented:

⇒ **Water & Sanitation** Sector (results 1 and 2)

##### A.1.1. Identification of water points completed (Health and hydro-geological survey, contact with key actors)

The expatriate expert, in cooperation with local representatives of the two target areas, has carried out the hydro-geological analysis and [...].

Through the analysis, adequate sites have been identified and the technical characteristics of the wells have been defined. Depth has been set at 45 metres at the Dist-one centre and 40 metres at the Dist-two centre. [...]

*Progress:* At the end of the work, a technical report was drafted (see annexes for more detail) and a meeting with representatives of the local office and health centres was organised. [...].

##### A.1.2. Building and putting in operation of two water points (drilling, pump installation, testing of water) in the two health centres (Dist-one and Dist-two)

During the 2nd and 3rd month the first water outlet for the Dist-one centre was built. The community, as was indicated in the operation proposal, took part in the search for materials and preparation of the terrain. [...].

*Progress:* At the end of the work, lab exams have been carried out to determine water quality and pumping tests were performed. [...] Both tests gave positive results.

##### A.1.3. Setting up of 2 Water Management Committees (handover of health centres, training & follow-up)

During the 3rd month the community has activated, cooperating actively with the director of the Dist-one Health centre, the Water committee. The committee is composed of [...] and has the purpose of [...]

To ensure that it could be immediately operational, a training module was produced. It is structured as follows [...].

*Progress:* The head of the operation has taken part in the activation of the Water committee, by participating in the meetings with the Health committees. [...]

##### A.2.1. Consultation with women to identify adequate places for building toilet facilities

The consultations have taken place [...] and have led to [...].

*Progress:* [...].

##### A.2.2. Construction according to international standards of 100 gender-separated latrines

40 of the 100 latrines foreseen in the project have been built [...]. The remaining 60 [...].

*Progress:* During construction of the latrines constant contact will be kept with community representatives [...].

##### A.2.3. Training and equipping of 10 persons in charge of maintaining latrines

[...]

*Progress:* Every month, meetings with a sample of women will be organised to verify [...].

⇒ **Health** Sector (results 3 and 4)

B.1.1. Reorganisation of the 2 health centres according to national protocols

[...]

B.1.2. Organisation of 2 seminars for medical and paramedical personnel of the 2 health centres

[...]

B.1.3. Drafting of a health monitoring plan in the two target zones

[...]

B.1.4. Coordination with AWD of vaccination campaign

[...]

B.1.5. Light rehabilitation of the 2 health centres

[...]

B.2.1. Supply of medical materials to the 2 health centres

[...]

B.2.2. Overseeing of the 2 health centres to ensure functioning of reference system

[...]

⇒ **Non-food Items** Sector (result 5)

C.1.1. Consultation with community representatives

[...]

C.1.2. Distribution of blankets and kitchen kits to 5.000 families classified as “vulnerable”

[...]

**Note**

- ⇒ **Specify if timetable has been met and, if applicable, what changes have been made and for what reasons;**
- ⇒ **Specify the impact of such changes**
- ⇒ **Update the work plan accordingly and include it as an annex.**

## 4.10. Work plan

Work has been carried out according to the timetable, except for the construction of the well for the Dist-two Health centre. Because of a more pressing state of emergency in Dist-one, work has been concentrated initially in this district [...].

For these reasons it has been decided to postpone the beginning of construction of the Dist-two well to the 4th month [...].

For the actualised work plan please see the annexed document.

## 4.11. Monitoring, evaluation and external audit

### 4.11.1. Monitoring

The monitoring plan has been defined according to the following table, listing the indicators to observe when examining the operation's expected results:

**Note:** Actualise the Terms of Reference of the monitoring plan in relation to the execution of the plan, highlighting any changes if and where applicable

### Actualised Terms of Reference for the Monitoring Plan

Expected result	Observed indicator	Source of verification and frequency of data collection	Person in charge	Reporting system	Decision-making process
A.1. The 2 health centres (Dist-one and Dist-two) have access to sufficient water for their needs	40 litres/day per admitted patient 5 litres/day per non-admitted patient 1.000 litres/day for other centre services (laundry, washing, kitchen, etc)	Daily monitoring record	<b>Head of warehouse for the Dist-one centre</b>	Verification of registry by chief of operation	Weekly team meeting with doctor responsible for area
	Continuous maintaining of water points (adequate cleaning, unobstructed drainage canal, prompt notice and repair of leaks/problems)	Daily visit and weekly report	Doctor responsible for area	Verification of report by Program Manager	Weekly team meeting with doctor responsible for area
	No faecal contamination (from coliforms) per 100 ml from source	Monthly laboratory exam	Laboratory director	Verification of results by Program Manager	Immediate intervention if standards not met
A.2. 2.000 residents have access to adequate and safe toilet facilities in the critical areas where the displaced population resides	Women can safely use toilet facilities	Monthly focus groups with a sample of women	Community leader	Meeting of community leaders and program manager	Weekly team meeting with doctor responsible for area
	100 latrines built and used appropriately	Technical evaluation at end of construction	Program Manager	Technical Report	Weekly team meeting with doctor responsible for area
	Latrines are at a minimum distance of 50m from dwellings	[...]	[...]	[...]	[...]
B.1. The organisation of services is strengthened in the 2 health centres (Dist-one and Dist-two, 15.000 users/year)	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
B.2. The 2 health centres (Dist-one and Dist-two, 15.000 users/year) are supplied with medical materials assuring their functioning	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]
C.1. 5.000 family groups classified as "vulnerable" are provided with minimum household items.	[...]	[...]	[...]	[...]	[...]
	[...]	[...]	[...]	[...]	[...]

#### 4.11.2. Evaluation

- Is an evaluation foreseen during the operation?  
Yes  No
- Is an evaluation foreseen after the operation?  
Yes  No

The final Terms of Reference, together with the CVs of the evaluators, will be included with the Pre-final report.

#### 4.11.3. External audit

- Is an audit foreseen during the operation?  
Yes  No
- Is an audit foreseen after the operation?  
Yes  No

**Note:** Fill in this section only if:  
⇒ Risks and assumptions have occurred;  
⇒ Security conditions have changed.

### 5. RISKS AND ASSUMPTIONS [NOT APPLICABLE]

No significant changes in the security conditions are currently identifiable and [...]. Moreover, none of the risks foreseen in the project has occurred, while all assumptions have. We consider it fundamental, however, to [...].

5.1. Pre-conditions

5.2. Assumptions and risk assessment profile

5.3. Security

5.3.1. Situation in the field

5.3.2. Have you established a specific security protocol for this operation?

Yes  No  Standard procedures

For more detail see operation proposal.

5.3.3. Have you a specific plan for security-related and medical evacuations for this operation?

Yes  No  Standard procedures

For more detail see operation proposal.

5.3.4. Are your field staff and expatriates informed of and trained in these procedures?

Yes  No

For more detail see operation proposal.

**Note:** Include in this section:

- ⇒ Percentage of budget already spent / committed;
- ⇒ Update / confirmation of data included in operation proposal (each budget change must be highlighted and justified).

## 6. RESOURCES REQUIRED

### 6.1. Total budget (point 11.1.)

As there has been a decrease in the co-financing percentage from AWD related to the distribution of medicines to the health centres (which have received medicines from other donors), a *supplementary agreement* to increase the percentage of co-financing from ECHO, so as to assure the full range of foreseen operations, has been requested to ECHO.

For this reason, on dd-mm-yy, a written request has been submitted to the Desk Officer with ECHO in Brussels, after previous discussion with the ECHO Field Expert. ECHO **approved the amendment** on dd-mm-yy and **a supplementary agreement has been signed by both parties** on dd-mm-yy (see Annexes for more details).

The new total estimated budget of the operation will amount to EUR 525.609,71.

The budget reduction approved by ECHO is 5% of the total estimated budget of the Budget Breakdown, amounting to EUR 27.765,97 (or half the AWD contribution initially foreseen); ECHO contribution has been raised from 85% (on a budget of EUR 527.553,33) to 89,43% of the new budget, with a decrease of funds initially foreseen by ECHO (from EUR 472.021,41 to EUR 470.077,77) because of an overall 7% reduction of administrative costs.

The percentage of the budget already committed is 42% of the new total estimated budget.

**Note:** Confirm or update the human resources effectively employed for the operation. Each budget change must be highlighted and justified.

### 6.2. Human resources

#### 6.2.1. Staff included in Title 1: “Goods and services delivered to the beneficiaries”

As per initial proposal.

The operation has incurred costs for the staff included under Title 01 for a total amount of € 18.000,00.

The estimate is based on the salary policy at HOx and the market costs in Interland.

#### 6.2.2. Staff included in Title 2: “Support costs”

As per initial proposal.

The operation has incurred costs for the staff included under Title 02 for a total amount of € 24.500,00.

The estimate is based on the salary policy at HOx and the market costs in Interland.

**Note:** Confirm or update the goods and services procured for the operation and the procurement procedures that have been followed. Each budget change must be highlighted and justified.

### 6.3. Material resources

#### 6.3.1. Equipment needed. Describe the procedure to be followed for the procurement of equipment.

As was foreseen, the following purchases / rentals / depreciations have been made:

Item	N°	Procurement procedures followed	Item
<b>PURCHASE</b>			
Pumps	2	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Purchasing cost / unit = € XXX; purchase made [...].	AFRIDEV Model
<b>RENTAL</b>			
4 X 4	1	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost per month = € XXX, rental made [...].	Model [...]
<b>DEPRECIATION</b>			
Radio	2	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 1 year); ⇒ Value of goods = XX; ⇒ Foreseen depreciation plan: [...]	Model [...]
4 X 4	1	⇒ Depreciation rates calculated for entire duration of operation according to depreciation plan used by HOx (depreciation in 2 years); ⇒ Value of goods = XX; ⇒ Foreseen depreciation plan: [...]	Model [...]

#### 6.3.2. Goods to be purchased. Describe the procedure to be followed for the awarding of contracts.

Item	N°	Procurement procedures followed	Notes
<b>ACQUISTO</b>			
Medical material (purchase of first lot)	See annexes for details	⇒ Open local call for bids (as indicated in ANNEX V) won by Firm XXX (see annex for further details), estimate of cost determined by market price lists; ⇒ Cost of first lot of material = € 80.000,00.	[...]
Various construction material (construction of wells, small rehabilitation interventions, latrines)	[...]	⇒ Simplified procedure (as indicated in ANNEX V); ⇒ Cost = € XXX.	[...]
<b>PURCHASE</b>			
[...]	[...]	[...]	[...]
<b>DEPRECIATION</b>			
[...]	[...]	[...]	[...]



**6.3.3. If the operation requires the purchase of medicines and/or medical equipment: Do you have standard procedures for the purchase, handling and storage of these medicines/equipment?**

Yes  No

For further details, see operation proposal.

**Note**  
Fill in this section only if changes have occurred

**7. PERSPECTIVES OF THE HUMANITARIAN ORGANISATION IN TERMS OF LINKING RELIEF, REHABILITATION AND DEVELOPMENT**

**[NOT APPLICABLE]** For the details, see operation proposal.

- 7.1. This (or similar) operation is under way since
- 7.2. Describe the expected level of sustainability
- 7.3. Continuum strategy

**Note**  
Fill in this section only if changes have occurred

**8. MAINSTREAMING**

**[NOT APPLICABLE]** For the details, see operation proposal.

**Note**  
Mention activities carried out for implementation of Visibility Plan

**9. VISIBILITY PLAN AND COMMUNICATION STRATEGY**

The following activities under the Visibility Plan have been carried out:

- a. Large boards installed with the logos of ECHO and HOx in the Health centres and the communities where the latrines will be built [...];
- b. T-shirts and doctors' white coats with the logos of ECHO and HOx have been donated to medical and paramedical personnel [...];
- c. The scope of the intervention and the roles of ECHO and HOx have been thoroughly explained during meetings with local authorities and community leaders [...];
- d. A radio program has been produced; the first broadcast was done on dd/mm/YY. A rerun will air [...].

**Note**  
Insert in this section the activities carried out and/or problems encountered

## **10. FIELD COORDINATION AND LOCAL IMPLEMENTING PARTNERS**

### **10.1. National and local authorities**

HOx is officially recognised in Interland (Registry act no. XXX) as a non-governmental entity and as such is exempt from [...]. It was therefore not necessary to [...].

### **10.2. Field co-ordination fora**

HOx has participated in two meetings of the local dialogue forum with other organisations [...] the meetings have been held in the capital [...] on dd/mm/YY in order to discuss [...] it has been decided [...]

**Note**  
Update or confirm in this section the data contained in the proposal

### **10.3. Implementing partner(s)**

#### **10.3.1. Name and address of implementing partner(s)**

As per initial proposal: Health Centre of Dist-one and Health Centre of Dist-two.

#### **10.3.2. Role of implementing partner(s) in this operation**

In both cases the partners have participated actively, within their assigned competence (providing of personnel and resources), in [...]. To actualise the census, besides, the partners have carried out two surveys [...].

#### **10.3.3. Type of relationship with implementing partner(s)**

As per initial proposal.

#### **10.3.4. History of previous collaboration with implementing partner(s)**

As per initial proposal.

#### **10.3.5. Name and title of the person(s) authorised to represent the implementing partner(s) with regard to this operation**

Mr XX (Dist-one), as per initial proposal: Mr ZX – and not Ms XY as indicated on initial proposal – because of staffing changes (Dist-two).

**Note**  
Update or confirm in this section the data contained in the proposal

### **10.4. Contractor(s) and procedure envisaged for the award of contracts**

#### **10.4.1. Name and address of contractor(s)**

#### **10.4.2. Role of contractor(s) in implementing this operation**

### 10.4.3. Describe the procedure followed for the selection of contractor(s)

All the procedures to be employed for work, service and supply contracts are in accordance with the provisions of Annex V (see also paragraphs 6.3.1. and 6.3.2. for more detail).

**Note**

Update or confirm in this section the data contained in the proposal. If changes are made it is **NECESSARY** to provide the reasons.

## 11. FINANCIAL INFORMATION

### 11.1. Total budget of the operation:

€ 525.609,71

As there has been a decrease in the co-financing percentage from AWD related to the distribution of medicines to the Health centres (which have received medicines from other donors), the new total estimated budget **approved by ECHO** on dd-mm-yy, will amount to EUR 525.609,71.

### 11.2. Contribution requested from European Community:

€ 470.077,77

Percentage of the total amount:

89,43 %

A **supplementary agreement** to increase the percentage of co-financing from ECHO, so as to assure the full range of foreseen operations, has been signed by both parties and approved by ECHO on dd-mm-yy (see Annexes for more details).

The **budget reduction approved by ECHO** is 5% of the total estimated budget of the Budget Breackdown, amounting to EUR 27.765,97 (or half the AWD contribution initially foreseen); ECHO contribution has been raised from 85% (on a budget of EUR 527.553,33) to 89,43% of the new budget, with a decrease of funds initially foreseen by ECHO (from EUR 472.021,41 to EUR 470.077,77) because of an overall 7% reduction of administrative costs.

### 11.3. Co-financing:

11.3.1. Indicate your own contribution: **[NOT APPLICABLE]**

11.4.1. Contributions by other donors:

€ 27.765,97

Name: AWD

Because of a donation of medicines from another entity, AWD has decided to decrease the funding for the supply of medicines, reducing its co-financing amount by 50%. The amount of AWD co-financing has therefore decreased from EUR 55.531,93 to EUR 27.765,97.

### 11.4. Pre-financing requested from European Community:

€ 376.062,21

Percentage of the total EC contribution:

80%

**Note:** If the pre-financing amount is paid in two instalments (art.5.1. GA) and the percentage of budget committed is at least 70% of the first instalment, the second payment can be requested in this paragraph.

Since an amount corresponding to 42% of the total estimated budget has been committed – corresponding to more than 70% of the previous payment – **we request** (as per article 5.1. of the GA) the payment of the **second pre-financing instalment** (amount fixed in article 5.1. of the Grant Agreement), corresponding to Euros 140.051,51 .

11.5. Eligibility of expenditures, date : **[NOT APPLICABLE]**

(4.3.) Start date of the operation : **[NOT APPLICABLE]**

11.5.1. If the operation has already started explain the reason that justifies that situation: **[NOT APPLICABLE]**

- Primary emergency operation
- Emergency operation
- Other

Please elaborate:

11.5.2. If the eligibility date of expenditure precedes the start date of the operation please justify this request **[NOT APPLICABLE]**

**Note**  
Fill in this section only if changes have occurred.

## **12. ADMINISTRATIVE INFORMATION [NOT APPLICABLE]**

12.1. Humanitarian organisation's official name, address, phone/fax n°

12.2. ECHO FPA number, (if applicable)

12.3. Name and title of legal representative

12.4. Name, telephone, fax and e-mail of desk officer at HQ

12.5. Name, telephone, fax and e-mail of the representative in the country of operation

12.6. Bank account

- Name of bank:
- Address of branch:
- Precise denomination of the account holder:
- Full account number (including bank codes):
- IBAN account code, (or BIC country code if the IBAN code does not apply):

## **13. CONCLUSIONS AND PARTNER'S COMMENTS**

It is emerging, at this stage of the operation, that – notwithstanding the intervention – the health conditions of the displaced population remain precarious. The near-complete lack of safe water outlets is a worsening factor [...].

[...] It is therefore being verified whether to take additional steps, and if so what, to ensure that the objectives of the operation are met [...].